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**FAX TRANSMISSION****DATE:** June 26, 2006**PTO IDENTIFIER:** Application Number 10/714,574-Conf. #1777  
Patent Number**Inventor:** Jeffrey M. Isner et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** EDWARDS ANGELL PALMER & DODGE LLP

Melissa Hunter-Ensor, Ph.D.

**PHONE:** (617) 439-4444**Attorney Dkt. #:** 47624DVC(71417)**PAGES (Including Cover Sheet):** 20

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Application No. (if known): 10/714,574

Attorney Docket No.: 47624DVC(71417)

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Two Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Amendment Transmittal (1 page)  
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AMENDMENT TRANSMITTAL LETTER			Docket No. 47624DVC(71417)	
Application No. 10/714,574-Conf. #1777	Filing Date November 14, 2003	Examiner Q. Nguyen	Art Unit 1633	
Applicant(s): Jeffrey M. Isner et al.				
Invention: COMPOSITIONS AND METHODS FOR MODULATING VASCULARIZATION				
<b>TO THE COMMISSIONER FOR PATENTS</b>				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims		- 20 =		x
Independent Claims		- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within second month				225.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				<b>225.00</b>
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity				
<input type="checkbox"/> No additional fee is required for this amendment.				
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>04-1105</u> in the amount of \$ <u>225.00</u> . A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Melissa Hunter-Ensor, Ph.D. Attorney/Agent Reg. No.: 55,289  EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (617) 439 4444				Dated: <u>June 26, 2006</u>